Is Being a Doctor Still Fun?

JOHN M. CHUCK, MD, and THOMAS S. NESBITT, MD, MPH, Sacramento; and JULIE KWAN, MA, and SHERILYN M. KAM, MA, Oakland, California

Over the past two decades, a decline in physician job and career satisfaction has been reported. This study was developed to determine the current state of physician satisfaction and to define factors correlated with overall satisfaction. We mailed a survey to 406 physicians in Solano County, California. Responses were anonymous, and data were analyzed by several methods. Of the 406 physicians, 251 (62%) responded. Most respondents were satisfied with their jobs (80%). The vast majority felt good about their ability to help their patients (92%), enjoyed the relationships they had with patients (93%) and colleagues (86%), and found their work intellectually satisfying (89%). Nearly two thirds (63%) of respondents thought their job was "fun." This ability to derive great pleasure from work showed the strongest correlation with overall satisfaction. Overall satisfaction did not differ between primary care and non-primary care physicians or between physicians in a large health maintenance organization and those in mostly solo and small-group fee-for-service practices. Despite substantial challenges to physician morale and autonomy, most responding physicians in our study continued to enjoy overall job satisfaction, and a solid majority thought that their work was fun.

(Chuck JM, Nesbitt TS, Kwan J, Kam SM: Is being a doctor still fun? West J Med 1993; 159:665-669)

The decade of the 1970s is frequently cited as a period of high job and career satisfaction for physicians. In a 1973 survey of 2,700 physicians, 85.6% had "no doubt at all" about their career choice.¹ During this time, a popular television series, "Marcus Welby, MD," enhanced the public image of physicians by portraying a caring family doctor who enjoyed the respect of his colleagues and the adoration of his community.

In the past two decades this level of physician satisfaction has reportedly declined, most notably among established primary care providers.² Gallup polls conducted for the American Medical Association in 1989 and 1990 showed that only 60% of physicians interviewed would definitely or probably enter medical school again.³ Major factors identified by disgruntled physicians in these and other surveys include the following: changes in methods of reimbursement leading to increased paperwork and decreased income; government and insurance company regulations interfering with physician autonomy in decision making; and a deterioration of the physician-patient relationship, marked by a decrease in patient respect for physicians and an increase in the number of malpractice lawsuits.¹⁵

What is the current status of physician job and career satisfaction? Is it true, as Lacsamana has suggested, that for many physicians, practicing medicine is no longer fun? Also, in our climate of reimbursement hassles, law-

suits, and decreased patient trust, which factors are most closely associated with overall job satisfaction? To help answer these questions, we present the results of a physician survey conducted in the spring of 1992.

Methods and Study Group

Our study group included physicians from Solano County, which is located in northern California between Sacramento and San Francisco. This county's ethnically diverse population of 340,421 and balance between rural farmlands and more urbanized settings make it representative of many American communities. We sent 406 physicians a questionnaire designed to assess satisfaction with various aspects of their work. Names and addresses were obtained from the membership roster of the Solano County Medical Society (SCMS physicians, n = 152) and the staff roster of the Kaiser Permanente Hospital in Vallejo, California (Permanente Medical Group [PMG] physicians, n = 254). The many PMG physicians who were members of the medical society were counted as PMG physicians. All responses were anonymous to encourage physician participation and candor of responses. For this reason, information on nonrespondents is not available. The questionnaire used a 7-point scale ranging from 1 (disagree strongly) to 7 (agree strongly), with 4 representing neutral, to indicate how much the respondents agreed with each item.

ABBREVIATIONS USED IN TEXT

PMG = Permanente Medical Group SCMS = Solano County [California] Medical Society

Correlational analyses were done to determine whether a statistically significant relationship existed at P < .01 between overall job satisfaction and ratings on various aspects of a physician's job and career. Data were also evaluated with a principal components factor analysis with Varimax rotation to determine the facets of satisfaction as represented by the items in our survey. In addition, t tests were conducted to determine whether there were statistically significant differences at P < .01 in ratings given by primary care versus non-primary care physicians and PMG versus SCMS physicians.

Results

A total of 251 physicians returned completed ques-

respondents

tionnaires, for an overall response rate of 62%. Primary care physicians (family practice, general practice, internal medicine, and pediatrics) comprised 42% of our respondent group and responded at a higher rate than non-primary care physicians (74% versus 55%). The Permanente Medical Group physicians comprised 65% of our respondents and responded at a slightly higher rate than their SCMS colleagues (65% versus 57%). On average, respondents were 44 years old and had been in practice for 12 years. The PMG respondents worked in a prepaid group model health maintenance organization. Of the 87 non-PMG respondents, the large majority (70, or 80%) described their practice as predominantly fee for service. preferred provider organization, individual practice association, and the like. Of these 87 respondents, a third were in solo practice, slightly less than a third in five-plusperson multispecialty groups, and a quarter in two- to four-person single-specialty groups.

Most of the respondents felt that overall they were sat-

Questionnaire Item			
Satisfaction and 'Value' of Being a Physician			
Overall, I am satisfied with my job	80		
I feel good about my ability to cure, heal, and help my patients	92		
My work is intellectually satisfying	89		
I have sufficient opportunities for professional growth	57		
My job is "fun"	63		
My job is prestigious	63		
In retrospect, the personal sacrifices I made during medical training were worthwhile	65		
In retrospect, the financial debts I accumulated during medical training were worthwhile	61		
Knowing what I know now, I would choose to be a physician again	67		
Knowing what I know now, I would choose my specialty again	70		
I would encourage my child to pursue a career in medicine	44		
Relationships			
l enjoy the relationships I have with my patients	93		
I enjoy the relationships I have with my patients	86		
l enjoy the relationships I have with my support staff	90		
l enjoy a meaningful personal and family life.	83		
	. 65		
Working Conditions			
I am satisfied with my amount of weekend and night duty	60		
I have control over my work environment	45		
I have control over the number of hours I work	47		
worry about contracting a serious infectious disease, eg,	45		
AIDS [acquired immunodeficiency syndrome], in the course of my work	45		
Business and Administrative Issues			
The future of my job is secure and predictable	65		
Physician malpractice premiums are too high	67		
My fear of being sued adversely alters the way I practice medicine	58		
have lost a significant amount of control over patient care due to regulatory agencies	52		
I have too many administrative duties	34		
have too many business worries	28		
Compensation and Benefits			
l am satisfied with my financial compensation.	72		
am satisfied with my benefits	82		
am satisfied with my retirement plan	75		

*Results reflect the percentage of respondents who rated the statement a 5, 6, or 7 on the 1 to 7 scale. All items were answered by at least 80% of

TABLE 1.—Respondents Who Agreed With the Following Statements

Questionnaire Item	Correlation Coefficient*
My job is "fun"	.67
Knowing what I know now, I would choose to be a physician again	.51
My work is intellectually satisfying	.48
have control over my work environment	.48
enjoy the relationships I have with my colleagues and consultants	.47
would encourage my child to pursue a career in medicine	.46
n retrospect, the financial debts I accumulated during medical training were worthwhile	.45
have control over the number of hours I work	.44
My job is prestigious	.43
n retrospect, the personal sacrifices I made during medical training were worthwhile	.42
feel good about my ability to cure, heal, and help my patients	.41
am satisfied with my financial compensation	.39
enjoy the relationships I have with my support staff	.36
Knowing what I know now, I would choose my specialty again	.35
have sufficient opportunities for professional growth, eg, teaching,	
research, continuing medical education	.34
enjoy the relationships I have with my patients	.31
The future of my job is secure and predictable	.30
am satisfied with my benefits	.29
enjoy a meaningful personal and family life	.27
am satisfied with my amount of weekend and night duty	.27
am satisfied with my retirement plan	.23
My fear of being sued adversely alters the way I practice medicine	22

isfied with their jobs (Table 1). A large majority felt good about their ability to help their patients and that their work was intellectually satisfying. A solid majority thought that their job was fun, and an equal proportion felt their job was prestigious. Two thirds of respondents indicated that they would choose to be a physician again and more than two thirds that they would choose their specialty again. A large majority of respondents enjoyed good relationships with their patients, their colleagues and consultants, and their support staff. In addition, most felt that they had a meaningful personal and family life.

The three items on the questionnaire that demonstrated the strongest relationship with overall job satisfaction were related to the satisfaction and "value" of being a physician (Table 2). Physicians who felt that their work was fun, would choose to be a physician again, and found their work to be intellectually satisfying were much more likely to report overall job satisfaction. Fear of being sued that led physicians to adversely alter their style of practice was correlated with lower job satisfaction, but the correlation coefficient was small. Further evaluation of our data with a principal components factor analysis supported the finding that survey items related to the intrinsic satisfaction of being a physician (satisfaction with the work itself) were more strongly related to overall job satisfaction than were extrinsic factors (such as satisfaction with pay and benefits) (r = .66 and .30, respectively,)P < .05). Finally, multiple regression analysis showed that the facets of job satisfaction represented in the survey accounted for a large amount (51%) of the observed variance in overall job satisfaction.

Comparison of Primary Care and Non-Primary Care Physicians

Overall, there were few differences in the average responses between primary care and non-primary care physicians (Table 3). Non-primary care physicians tended to agree more strongly that they worry about contracting a serious infectious disease at work; that they would choose their specialty again; and that they feel good about their ability to cure, heal, and help their patients. These differences, although statistically significant, were relatively small.

Comparison of Solano County Medical Society and Permanente Medical Group Physicians

The largest difference noted between the SCMS and the PMG physicians was that, on the average, the SCMS physicians agreed and PMG physicians disagreed that physicians had too many business worries, had lost a substantial amount of control over patient care because of regulatory agencies, and had too many administrative duties (Table 3). The SCMS physicians tended to concur more strongly that they had control over their work environment and the number of hours they worked. The PMG physicians felt more strongly that the future of their jobs was secure and predictable and that they were more satisfied with issues related to compensation and benefits.

Summary and Discussion

Despite recent negative publicity about medical careers, most physicians in our respondent group were satisfied with their jobs. This global satisfaction is important

TABLE 3.—Mean Ratings for Primary Care Versus Non-Primary Care Physicians and Permanente Medical Group (PMG) Versus Solano County Medical Society (SCMS) Physicians on Statements Related to Career Satisfaction*

Questionnaire Item	Average Total Sample Rating	Average Primary Care Rating	Average Non-Primary Care Rating	Average PMG Rating	Average SCMS Rating
Satisfaction and 'Value' of Being a Physician					
Overall, I am satisfied with my job	5.34	5.21	5.45	5.36	5.31
feel good about my ability to cure, heal, and help my patients	5.92	(5.70)	(6.10)	5.89	5.97
My work is intellectually satisfying	5.66	5.58	5.73	5.59	5.80
have sufficient opportunities for professional growth,					
eg, teaching, research, continuing medical education	4.46	4.39	4.52	4.27	4.80
v/ly job is "fun"	4.60	4.42	4.74	4.65	4.49
My job is prestigious	4.80	4.73	4.85	4.80	4.80
n retrospect, the personal sacrifices I made during medical training were worthwhile	4.85	4.81	4.88	4.94	4.67
n retrospect, the financial debts I accumulated during medical training were worthwhile	4.90	4.78	5.00	5.01	4.69
(nowing what I know now, I would choose to be a physician again	4.94	5.03	4.87	5.15	4.55
(nowing what I know now, I would choose my specialty again	5.15	(4.79)	(5.44)	5.30	4.85
Relationships					
enjoy the relationships I have with my patients	5.94	5.94	5.94	5.92	5.98
enjoy the relationships I have with my colleagues and consultants	5.64	5.51	5.75	5.73	5.47
enjoy the relationships I have with my coneagues and consultants	5.69	5.68	5.70	5.59	5.88
enjoy a meaningful personal and family life	5.70	5.73	5.68	(6.00)	(5.13)
enjoy a meaningral personal and family life	3.70	3.73	5.00	(0.00)	(3.13)
Norking Conditions					
am satisfied with my amount of weekend and night duty	4.71	4.67	4.74	(4.98)	(4.20)
have control over my work environment	3.85	3.61	4.05	(3.49)	(4.54)
have control over the number of hours I work	4.02	3.95	4.08	(3.74)	(4.56)
worry about contracting a serious infectious disease, eg,		(0.50)	(4.04)	2.04	2.07
AIDS [acquired immunodeficiency syndrome], in the course of my work	3.96	(3.53)	(4.31)	3.96	3.97
Business and Administrative Issues					
The future of my job is secure and predictable	4.74	4.83	4.66	(5.31)	(3.65)
Physician malpractice premiums are too high	5.23	5.29	5.18	5.17	5.33
My fear of being sued adversely alters the way I practice medicine	4.50	4.54	4.46	4.39	4.71
have lost a significant amount of control over patient care due to regulatory agencies, eg,					
CMRI [California Medical Review, Inc] (Medicare), Medi-Cal, and the like	4.40	4.44	4.36	(3.50)	(5.98)
have too many administrative duties	3.81	3.75	3.85	(3.14)	(5.05)
have too many business worries	3.27	3.28	3.27	(2.25)	(5.17)
Compensation and Benefits					
am satisfied with my financial compensation	5.13	5.13	5.12	(5.49)	(4.45)
am satisfied with my benefits	5.58	5.72	5.47	(6.08)	(4.64)
am satisfied with my retirement plan	5.32	5.39	5.27	(5.94)	(4.07)

*Respondents used a 7-point scale ranging from 1 (disagree strongly) to 7 (agree strongly), with 4 representing neutral to indicate how much they agreed with each item. Significant differences between average ratings by primary care and non-primary care physicians and PMG and SCMS physicians (P < .01) are shown in parentheses.

as it has been associated with increased physician retention and could arguably lead to higher morale, enhanced productivity, and improved quality of care. It is encouraging that most respondents also felt that their job was fun. This suggests that whereas the recent demoralization of the medical profession is definitely real, perhaps its severity and effect on individual physicians have been overstated. The finding that having fun at work demonstrated the strongest correlation with overall job satisfaction suggests that efforts directed at helping physicians to derive enjoyment from their work may be of paramount importance if the goal is to improve overall job satisfaction.

Our comparison of primary care and non-primary care physicians refutes the statement that most primary care physicians perceive themselves to be, and are, overworked, underpaid, and underrecognized for their efforts. Our pri-

mary care respondents showed comparable overall satisfaction, intellectual satisfaction, and prestige with their subspecialty colleagues. This is an important finding for those groups interested in increasing the number of generalists in this country. Current efforts to achieve this goal emphasize altering medical student selection and training and improving practice conditions and economic rewards for generalists. The long-term success of these efforts is equally dependent on students choosing careers in primary care because they are convinced by practicing physicians, such as those in our study, that this type of career will be rewarding and satisfying.

The overall job satisfaction enjoyed equally by our SCMS and PMG respondents contrasts with earlier studies from the 1970s that suggested a higher level of satisfaction among physicians in solo and small-group fee

for-service practices.9 We think that the main reason for this change is that physicians in smaller groups are facing an increasing burden of business and administrative problems; meanwhile, their colleagues in larger prepaid groups remain relatively insulated from these problems by their economy of scale, centralization of support services, and methods of reimbursement.

Finally, the finding that 67% of respondents would choose to be physicians again is encouraging. This percentage compares favorably with a random sample of 685 employed adults in which only 44% of respondents said they would have chosen their same line of work (Gallup Poll, May 1988, for Accountants on Call). In Wolfgang's study, physicians (77%) were more likely than nurses (64%) and pharmacists (55%) to choose their professions again.¹⁰ We conclude that despite considerable challenges to physician morale and autonomy, medicine continues to be a relatively satisfying and desirable career choice for most physicians in our respondent group. A larger national study of physician satisfaction that includes a more representative sample of practice settings would be helpful in determining whether our findings accurately reflect the attitudes of physicians in other parts of the country.

REFERENCES

- 1. Hadley J, Cantor JC, Willke RJ, Feder J, Cohen AB: Young physicians most and least likely to have second thoughts about a career in medicine. Acad Med 1992; 67:180-190
- 2. Lewis CE, Prout DM, Chalmers EP, Leake B: How satisfying is the practice of internal medicine? Ann Intern Med 1991; 114:1-5
- 3. Harvey LK, Shubat SC: Physician Opinion on Health Care Issues. Chicago, Ill, Issue and Communications Research, American Medical Association, April 1989 and April 1990
- 4. Reams HR, Dunstone DC: Professional satisfaction of physicians. Arch Intern Med 1989; 149:1951-1956
- 5. Charles SC, Warnecke RB, Wilbert JR, Lichtenberg R, DeJesus C: Sued and nonsued physicians-Satisfactions, dissatisfactions, and sources of stress. Psychosomatics 1987; 28:462-468
- 6. Lacsamana RG: Quitting when the fun is gone (Editorial). J Florida Med
- 7. Lichenstein R: Measuring the job satisfaction of physicians in organized settings. Med Care 1984; 22:56-68
- 8. Levinsky NG: Recruiting for primary care (Sounding Board). N Engl J Med 1993; 328:656-660
- 9. Schulz R, Girard C, Scheckler W: Physician satisfaction in a managed care environment. J Fam Pract 1992; 34:298-304
- Wolfgang AP: Career satisfaction of physicians, nurses, and pharmacists. Psychol Rep 1988; 62:938